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CONFIRMATION NO. 3543

SERIAL NUMBER 10/606,149	FILING OR 371(c) DATE 06/25/2003 RULE	CLASS 055	GROUP ART UNIT 1724	ATTORNEY DOCKET NO.
APPLICANTS Michael R. Elliott, Beloit, WI; ** CONTINUING DATA ***** <i>RAH</i> This application is a CIP of 09/930,770 08/15/2001 ABN ** FOREIGN APPLICATIONS ***** <i>RAH none</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 09/15/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>RAH</i> Examiner's Signature <i>RAH</i> Initials		STATE OR COUNTRY WI	SHEETS DRAWING 7	TOTAL CLAIMS 40
INDEPENDENT CLAIMS 6				
ADDRESS 20606				
TITLE CYCLONIC SEPARATOR FOR MIST COLLECTORS				
FILING FEE RECEIVED 941	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials					
ADDRESS 20606					
TITLE Cyclonic separator for mist collectors					
FILING FEE RECEIVED 816	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		